TOWN OF EAST HAMPTON MONTAUK PLAYHOUSE COMMUNITY CENTER 240 EDGEMERE ST. MONTAUK, NY 11954

APPLICATION TO RESERVE TOWN BUILDING

| 1. Name & add | ress of applicant: | |
|-------------------|--------------------------------------|--|
| 2. Phone: | Fax: | Cell: |
| 3. What is the n | ature & purpose of this even | t? |
| 4. Date of the e | vent: | |
| 5. Room reques | ted: | |
| 6. Times reques | sted: From: | To: |
| 7. Fee required: | \$(No Ci | redit Cards) |
| 8. Number of p | eople: | |
| 9. Litter: All re | fuse is to be placed in the pro | oper receptacles only. |
| 10. Parking: Pa | rking is to be in designated a | reas in the parking lot. |
| | t failure to comply with the a | is Town facility. The applicant further applicable portions of the Town Code may |
| Organizations u | sing Senior Nutrition room 1 | 116 may: |
| | g in refreshments, coffee pot | |
| | hen is not available for use. | |
| 3. Leav | ve room as it was found, in a | neat and orderly condition. |
| Date: | | |
| | | (signature of applicant) |
| Approved: | | Date: |

The completed, signed application shall be submitted to the Director of the Montauk Playhouse, 240 Edgemere St., Montauk, NY 11954.

(Applicant must sign both sides of form)

RELEASE OF ALL CLAIMS

AND

AGREEMENT TO INDEMNIFY AND HOLD HARMLESS

| Date: | |
|---|---|
| | of the permission given by the Town of East Hampton for |
| the use of | (Name of Town Facility) |
| | |
| To be used for | (Name of Event) |
| | |
| | hereby agrees to indemnify and hold harmless the |
| Town of East Hampton and ever liabilities, claims, suits, awards of | y agent, employee and official thereof against all or judgments whatsoever which may arise directly or ty in favor of or which might be claimed by: |
| (Na | me of applicant/organization) |
| indemnify and hold harmless is a permission given by the Town of | and agreed that this release of claims and agreement to a condition precedent and an unseverable part of the f East Hampton and the Town was induced to grant such cundersigned to grant this release. |
| | NAME:(Please Print) |
| | (Please Print) |
| Re | esponsible official of organization with authority to sign |
| Si | gnature: |
| | |
| AUTHORIZED BY: | DATE: |